

## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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## LOBBYIST REGISTRATION FORME ETHICS COMMISSION

(Type or Print Clearly) PART I **LOBBYIST** NAME (Last) (First) (Middle) **TELEPHONE** W. Nekota (808) 674-3201 Cameron MAILING ADDRESS (Street) FAX 1001 Kamokila Blvd.; James Campbell Building, Suite 250 (808) 674-3349 (City) (State) (Zip Code) HI 96707 Kapolei EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE Kapolei Property Development LLC (an affiliate of James Campbell Company LLC) (808) 674-6674 MAILING ADDRESS (Street) FAX 1001 Kamokila Blvd.; James Campbell Building, Suite 250 (808) 674-3349 (City) (State) (Zip Code) Kapolei HI 96707

PART II ORGANIZATION				
NAME OF ORGANIZATION YO	TELEPHONE			
Kapolei Property Deve	(808) 674-3201			
MAILING ADDRESS (Street)	FAX			
1001 Kamokila Blvd.;	(808) 674-3349			
(City)	(State)	(Zip Code)		
Kapolei	HI	6707		
NAME OF PERSON RESPONSIBI	LE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE		
Cameron W. Nekota	(808) 674-3201			
MAILING ADDRESS (Street)	FAX			
1001 Kamokila Blvd.; James Campbell Building, Suite 250		(808) 674-3349		
(City)	(State)	(Zip Code)		
Kapolei	HI	96707		

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PART III DESCRIPTIO	N OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBBY			
Agriculture	Education	☐ Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	☐ Labor & Employment	Transportation		
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & Water Use Management	Other: (indicate below)		
Ecology, Energy Environmental Protection	Housing	☐ Public Safety & Corrections			
PART IV CERTIFICATION OF LOBBYIST					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.					
3/14/07					
(Signature of Lobbyist)			(Date)		
PART V AUTHORIZATION TO LOBBY					
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
Bradford J. Myers	President				
NAME OF ORGANIZATION (if applicable)			TELEPHONE		
Kapolei Property Deve	(808) 674-3121				
MAILING ADDRESS (Street)			FAX		
1001 Kamokila Blvd.; James Campbell Building, Suite 250			(808) 674-3349		
(City)	(State) (Zip		(ip Code)		
Kapolei	НІ	96707			
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.					
3114/07		14/07			
(Signature of Authorizing Officer or Person Represented)		(Date)			

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